SUDMIT: COMPLETED API STATEMENT AND FEE TO: Bayfield County Planning and Zoning PO Box 58 Washburn, WI 5489 (715) 373-6138 STRUCTIONS: No permits will be cacks are made payable to: Bayfie	Depart. JUL 13 2017 Date Stan Bayfield Co. Zoning Dept.	JUN 28 201	CONSIN	Permit #: Date: Amount Pa	18-037 9-18- 1757	18 1-8-1 dak
Owner's Name: Timethy Vick Address of Property: S 0 9 7 6 Br	Sanitary Mailing Ch Lake Road Contra	g Address: GEOGE Atate/Zip: ACCES WI actor Phone: Plu	ONDITIONAL City/St	use SPECIAL US ate/Zip ate/Zip ress (include City/State/Z	Cell Phone 153 Plumber P	: 17-6053 hone: uthorization
1/4,	escription: (Use Tax Statement) Gov't Lot Lot(s) CS	75 , 7 P. 224 Town of:	Lot(s) No.	Docur		Register of Deeds) 321753 999 132
Creek	operty/Land within 1000 feet of Lake, Pol	yescontinue>	Distance Struc	ture is from Shoreline fe ture is from Shoreline 05 fe	Floodplain Zone?	Are Wetlands Present? ☐ Yes ☐ KNO
\$ Good Add Corr Relu	Project # of Stories and/or basement V Construction	Use Seasonal Year Round	# of bedrooms 1 2 3 None	Sewer/S Is on to Municipal/City (New) Sanitary Sanitary (Exists	Specify Type: <u>((uss</u>) Vaulted (min 200 gallerice contract)	Water City Well Special
	rmit being applied for is relevant to it)	Length: 30	9'	Width: 30 Width:	Height:	/6'
Proposed Use Residential Use	Principal Structure (first structure) Residence (i.e. cabin, hunting with Loft with a Porch with (2 nd) Porch with a Deck with (2 nd) Deck	g shack, etc.)			Dimensions (Footage 400 288
Commercial Use Municipal Use	with Attached © Bunkhouse w/ (□ sanitary, o Mobile Home (manufactured Addition/Alteration (specif Accessory Building (specif Accessory Building Addition	Garage or □ sleeping quarters I date) fy) n/Alteration (specification)	у)		(X) (X) (X) (X)	
I (we) declare that this applic	Special Use: (explain) Conditional Use: (explain) Other: (explain) FAILURE TO OBTAIN A PERMIT or strong (including any accompanying information) has been letail and accuracy of all information I (we) am (are) provided to the provided p	STARTING CONSTRUCTION examined by me (us) and to to	N WITHOUT A PER	Kilowiedge and belief it is true,	(X) (X) LTIES correct and complete. I (we) acker	nowledge that I (we) ccept liability which have access to the
may be a result of Bayfield of above described property	ounty relying on this information I (we) and (ale) providing any reasonable time for the purpole of inspection. Owners listed on the Deed All Owners must significant the Deed All Owners must sign	gn or letter(s) of author	ization must acco	ompany this application)	Date	3/17
Address to send per	(If you are signing on behalf of the owner(s) a	a letter of authorization	must accompan		Attach Copy of Tax Sta chased the property send you	tement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

OK TO ISSUE PER DIRECTOR SCHIERMAN 9-18-17 EXPIRED

Draw or Sketch your Property (regardless of what you are applying for)

Proposed Construction Show Location of: North (N) on Plot Plan (2) Show / Indicate:

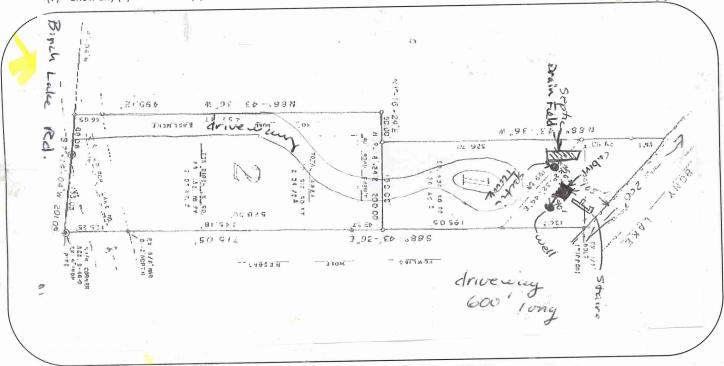
(*) Driveway and (*) Frontage Road (Name Frontage Road) Show Location of (*): (3)

All Existing Structures on your Property Show: (4)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show:

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (6)

(*) Wetlands; or (*) Slopes over 20% Show any (*): (7)



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurer	nent
Setback from the Centerline of Platted Road	650 Fee		Setback from the Lake (ordinary high-water mark)	105	Feet Feet
Setback from the Established Right-of-Way	Fee	t	Setback from the River, Stream, Creek Setback from the Bank or Bluff		Feet
Setback from the North Lot Line Setback from the South Lot Line	/05 Fee		Setback from Wetland		Feet
Setback from the West Lot Line	60' Fee		20% Slope Area on property Elevation of Floodplain	Yes	☐ No Feet
Setback from the East Lot Line		1		40'	Feet
Setback to Septic Tank or Holding Tank Setback to Drain Field	50' Fee		Setback to Well	1.0	***
	Foo	et ick, the	boundary line from which the setback must be measured must be visible from	one previously surveyed	corner to the

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Issuance Information (County Use Only)	Sanitary Number:	-1025/TANK	# of bedrooms: 2	Sanitary Date: 7/29/08
Permit Denied (Date):	Reason for Denial:	200		
Permit #: 18-0370	Permit Date: 9-18	-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recoil Yes) (Fused/Contigu	uous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ✓ No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No ☐ No
Granted by Variance (B.O.A.) Yes No Case #:		Previously Granted b ☐ Yes ☐ No	y Variance (B.O.A.) Case	#:
Was Parcel Legally Created Yes 🗆 No	0	Were Property Lin	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ Yes ☐ No
Inspection Record:				Zoning District (()) Lakes Classification ()
Date of Inspection:	Inspected by:			Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Att	Condition: Maximum of based upon septic sidwelling. Must contact Dept for licensing as reand contact Town regard	ccupancy limited to system design for t Bayfield County He equired by State Stat	the alth	Date of Approval: 9/17/18
Hold For Sanitary:	Hold For Aff	fidavit: 🔲	Hold For Fees:	

√illage, State or Federal
y Also Be Required

USE - X ANITARY - 08-102S SIGN -

SIGN -SPECIAL - Class A CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-	0370			Issue	d To: T	imoth	y & Vicki Gj	ovik							
Location:		1/4	of	-1	1/4	Section	9	Township	44	N.	Range	9	W.	Town of	Barnes	
Gov't Lot			L	.ot	1	В	ock	Sul	bdivisio	n				CSM# 1	175	

For: Residential Other: [1 – Unit; 1- Story; Short-term Rental]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Maximum occupancy limited to 6 based upon septic system design for the dwelling. Must contact Bayfield County Health Department for licensing as required by State Statute and contact Town regarding room tax.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 18, 2018

Accessory Building Addition/Alteration (specify)

Accessory Building

ATF-DECK \$150

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.

PO Box 58 Washburn, WI 54891 (715) 373-6138

Date Stamp (Received)
DECE VE

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

SEP 0 1 2017

Permit #: 18-03-71

Date: 9-18-18

Amount Paid: /50 9-/-/)

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

TYPE OF PERMIT		ITINU NC	ALL PERMITS H		APPLICANT.							
0	T REQU	ESTED-	→ □ LAI	ND USE SA	NITARY	eld Co. Zo	eonortion	IALLISE D SPE	2141 1100			
Owner's Name:		1			Mailing Ad	dress:		ty/State/Zip:	CIAL USE			OTHER
Tim G	TOV	ile			171.0	1-20.00	1 Douglas		540	/ , 10	Telepho	ne:
Address of Proper	ty:				City/State/	George	Commi	New Rich	imme	1 61		
50979 BI	rch	Lale	Rd								Cell Phor	ne:
Contractor:			1701		Bark		21				715-9	77-0853
					Contractor	Pnone:	Plumber:				Plumber	Phone:
Authorized Agent:	(Person	Signing Ap	plication on beh	alf of Owner(s))	Agent Phor	ne:	Agent Mailing 4	Address (include City/S	State /7:\.			
							- game manning /	tadiess (include City)s	state/Zip):		Written / Attached	Authorization
PROJECT	e8 -		7		Tax ID# (4-5	digits)					☐ Yes	□ No
LOCATION	Les	al Descr	iption: (Use	Tax Statement)	,	/7	211		Recorded	Deed (i.e. #	assigned by	Register of Deed
			Gov'	t Lot Lot(s)	CSM	Vol & Page	Lot(s) N	In Block AV			7 R-	711/7/
1/4,		1/4			1175	7+224		lo. Block(s) No.	Subdivisi	on:		
	A G		25.21			Town of:						
Section	01	, Townsh	ip <u>44</u>	N, Range <u>09</u>	W		vues		Lot Size		Acreag	5
	-						V 1000		29,45	5 9951	/	36
	Cre	Proper	ty/Land withi	n 300 feet of Rive of Floodplain?			Distance Str	ucture is from Shore	eline :	Is Prop	erty in	A == 14/11
MShoreland						ontinue>			feet		in Zone?	Are Wetlands Present?
	IZ, IS	Propert	y/Land withi	n 1000 feet of Lak			Distance Str	ucture is from Shore	eline :	\	Yes	☐ Yes
☑ Non-Shoreland	2.5		10		it yesco	ontinue ->		85	feet	OK.	No	≪No
3 Non Shoreland												
Value at Time					ATE STOR		· BEKUNESI					
of Completion		Proje	ect	# of Stories			#	10 10 10	What Ty	ne of		
* include donated time &		,		and/or basem		Use	of			ry System	1	Water
material							bedrooms		n the pr			- Trace
	≥ Ne	w Cons	truction	☐ 1-Story	□ S	easonal	□ 1	☐ Municipal/C				
\$	□ Ad	dition/	Alteration	☐ 1-Story + Lo		ear Round	□ 2	☐ (New) Sanita		fu Tura		☐ City
5000		nversio		☐ 2-Story			□ 3	☐ Sanitary (Exi				
			existing bldg)	☐ Basement				☐ Privy (Pit) o	r 🗆 Vau	Ity Type: _	200 gallan	
	200		iness on	☐ No Baseme	nt		None	□ Portable (w/s	ervice cor	ntract)	200 gallor	1)
		perty		☐ Foundation				☐ Compost Toi		rer a de cy		
				Deck	_			风 None				
Existing Structure	e: (if pe	ermit bei	ng applied fo	r is relevant to it)	Leng	rth:		140 141				
Proposed Constr	uction:		Deck	ALCH THE	Leng) /	Width:	6'		ght:	d
A STATE OF THE REAL PROPERTY.								width.	0	Hei	ght: /	Vou
Proposed Us	e	1			Propo	sed Structur	e		Di	imension		Square
		V	Principal S	Structure (first s	tructure or	n nronerty)			HALLER			Footage
			Residence	(i.e. cabin, hunt	ing shack.	etc.)			130	X 30)	900
				with Loft	0	3.0.7			1	X)	
Residential I	Use	·		with a Porch					1	X	-)	
				with (2 nd) Pore	ch				1	X	1	
		X		with a Deck				V	(30	X /6	- 1	385 594
☐ Commercial	Her			with (2 nd) Dec				<i>A</i>	(X)	203 7
Commercial	use								(Х)	
			Bunkhous	With Attached Garage (X)								
			D.O. 1 .1	e w/ (□ sanitary,	<u>or</u> □ sleepi	ing quarters, <u>c</u>	r 🗆 cooking &	food prep facilities)	(X)	
			Mobile Ho	me (manufacture	d date)			food prep facilities)	(X)	
☐ Municipal III	se		Addition//	me (manufacture Alteration (spec	d date) ify)				(770)	
☐ Municipal U	se		Accessory	me (manufacture Alteration (spec Building (spec	d date) ify) ify)				(Х)	
☐ Municipal U	se		Accessory	me (manufacture Alteration (spec Building (spec	d date) ify) ify)				(X)	
☐ Municipal U	se		Accessory	me (manufacture Alteration (spec Building (spec Building Addition	d date) ify) ify) on/Alteration	on (specify)			(X X X)	
□ Municipal U	se		Accessory Accessory Special Use	me (manufacture Alteration (spec Building (spec Building Addition 2: (explain)	d date) ify) ify) pn/Alterati	on (specify)			(X X X)	
□ Municipal U	se		Accessory Accessory Special Use	me (manufacture Alteration (spec Building (spec Building Addition 2: (explain)	d date) ify) ify) pn/Alterati	on (specify)			(X X X X)	
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I (we) declare that this am (are) responsible for may be a result of Bay above described prope Owner(s): (If there are Multane Authorized Agent	application or the detarfield Courrty at any tiple w	n (including) il and accumity relying reasonable	Accessory Accessory Accessory Special Use Conditiona Other: (exp FAILURE TO (any accompanyin racy of all information this information time for the purpod on the Deed	me (manufacture Alteration (spec Building (spec Building Addition e: (explain) Il Use: (explain) DBTAIN A PERMIT or g information) has been tion I (we) am (are) provid use of inspection. All Owners must sign If of the owner(s) a	STARTING COL examined by me iding and that it ing in or with th	NSTRUCTION We (us) and to the be will be relied upo is application. I (w	ITHOUT A PERMIT est of my (our) know n by Bayfield Count e) consent to count on must accompa	WILL RESULT IN PENAL ledge and belief it is true, c y in determining whether to y officials charged with add	orrect and co issue a perr ministering co	X X X X X X	ther accept lia	ability which cocess to the
above described prope Owner(s): (If there are Mul	application or the detarfield Courrty at any tiple w	n (including) il and accumity relying reasonable	Accessory Accessory Accessory Special Use Conditiona Other: (exp FAILURE TO (any accompanyin racy of all information this information time for the purpod on the Deed	me (manufacture Alteration (spec Building (spec Building Addition e: (explain) Il Use:	STARTING COL examined by me iding and that it ing in or with th	NSTRUCTION We (us) and to the be will be relied upo is application. I (w	ITHOUT A PERMIT est of my (our) know n by Bayfield Count e) consent to count on must accompa	WILL RESULT IN PENAL ledge and belief it is true, c y in determining whether to y officials charged with add	orrect and co o issue a perr ministering co Dat	X X X X X X	ther accept liaces to have an	ability which coses to the

Show Location of: Show / Indicate:

Proposed Construction

Show Location of (*):

North (N) on Plot Plan

(4) Show: (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(5) Show: Show any (*): (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%

(7) Show any (*): 331.05 0 Bony Luke 050 0

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	ent	Description	Measurement		
Setback from the Centerline of Platted Road	1000	Feet	Setback from the Lake (ordinary high-water mark)	85	Feet	
Setback from the Established Right-of-Way	1000	Feet	Setback from the River, Stream, Creek	-	Feet	
			Setback from the Bank or Bluff	-	Feet	
Setback from the North Lot Line	60'	Feet				
Setback from the South Lot Line	60'	Feet	Setback from Wetland	_	Feet	
Setback from the West Lot Line	351	Feet	20% Slope Area on property	Yes	□No	
Setback from the East Lot Line	299'	Feet	Elevation of Floodplain	_	Feet	
		_		-: 4 -		
Setback to Septic Tank or Holding Tank	50	Feet	Setback to Well	40	Feet	
Setback to Drain Field	40	Feet				
Setback to Privy (Portable, Composting)		Feet				

461.60

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Issuance Information (County Use Only	Sanitary Number:	08-1025	# of bedrooms: 2	Sanitary Date: 5/12 /n C		
Permit Denied (Date):	Reason for Denial:			7/12/09		
Permit #: 18-0371	Permit Date: 9-1	18-18				
		Mitigation Required Mitigation Attached	☐ Yes No ☐ Yes No	Affidavit Required Affidavit Attached		
Granted by Variance (B.O.A.) ☐ Yes No Case #:		Previously Granted by	y Variance (B.O.A.)	±#:		
Was Parcel Legally Created Ye. Was Proposed Building Site Delineated Ye.	No HTF	Were Property Line	es Represented by Owner Was Property Surveyed	Yes O No		
Inspection Record:				Zoning District (R - 1) Lakes Classification ()		
Date of Inspection:	Inspected by:	Date of Re-Inspection:				
Condition(s): Town, Committee or Board Condition	Condition contract obtained		from the locally agency must be of construction if	Date of Approval:		
Hold For Sanitary: Hold For TBA	: U Hold For Af	fidavit:	Hold For Fees:			

After-the-Fact

AND USE - X

SANITARY - 08-102S

SIGN
SPECIAL
CONDITIONAL
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Timothy & Vicki Gjovik 18-0371 Issued To: No. Town of **Barnes** Range 9 W. Township 44 Section Location: 1/4 of CSM# 1175 Subdivision Block Lot Gov't Lot

For: Residential Addition / Alteration: [1- Story; Deck (30' x 16') = 480 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction If required. Must meet and maintain setbacks

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 18, 2018

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

ATF-Bunkhouse \$150 **APPLICATION FOR PERMIT** BAYFIELD COUNTY WISCONSIN SEP 0 1 2017

Permit #:	18-0	37a
Date:	9-	18-18
Amount Paid:	150	9-1-17
Refund:		

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Bayfield Co. Zoning Dept.

OO NOT START CONSTRI	UCTION U	NTIL ALL I	PERMITS HAV	E BEEN ISSUED TO	APPLICANT.	l-ş								
TYPE OF PERMIT R	EQUEST	ED-	☐ LAND	USE SAI	Market Market Control		CON	The same of the same of the same of	LUSE SPE					1
Owner's Name:	/				Mailing Ad			1	State/Zip:	540		Telephon	2:	
Tim Coy o	vik						Dern	un Die	w Richm.	inel	W,	- 11 -1		
		1	n I		City/State/		. 0 :					Cell Phon	-	n cm3
50979 BI	rcli h	idee	Kd		Barr		e)i				7/5- 977-0 85°			
Contractor:					Contractor Phone: Plumber:							riumper l	none	
Authorized Agent: (P	Person Signi	ing Applica	ation on behalf	of Owner(s))	Agent Pho	ne:	Agent	Mailing Add	dress (include City,	/State/Zip)	/Zip): Written Authorization Attached			ization
	,											□ Yes		
PROJECT LOCATION	Legal I	Descript	i <mark>on</mark> : (Use Ta	x Statement)							t #:			= "
1/4,		1/4	Gov't	Lot Lot(s	CSM 1175	Vol & Page	е	Lot(s) No.	Block(s) No.	Subdivi	sion:			
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	∏ le De	roperty	land within	300 feet of Riv	er. Stream	incl. Intermittent) Die	stance Stru	cture is from Sho	reline :		autor !		Motion
	Creek			f Floodplain?		continue -	′ I			feet	Is Prop Floodpla		N. S. S. S. S. S.	Wetlands resent?
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the same of the same				2	If yes	continue -	<u> </u>		85"1	feet		Vo		₫ No
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material								urooms		s on the	oroperty:		PH.	
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s			lteration	☐ 1-Story +		Year Round	_	2	☐ (New) San				_	□ Well
10,000		version		☐ 2-Story ☐ Basemen	.		-	3	☐ Sanitary (I☐ Privy (Pit)			200 gallo		
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			Residenc	e (i.e. cabin, h	unting shad	ck, etc.)				(Х)		
				with Loft						(Х)		
Residential	use			with a Pord with (2 nd) F						1	X)		
				with a Decl						(X)		
				with (2 nd) [(Х)		
☐ Commercia	Use			with Attacl		<u> </u>				(Х)		
		D	Bunkhou	se w/ (□ sanita	ry, <u>or</u> 🗷 sle	eeping quarte	ers, <u>or</u> [cooking 8	k food prep facilit	ies) (36 X/2	(2,5)		450
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	Addition/Alteration (specify) (X)				
☐ Municipal (use		Accessor	y Building (s	specify)	,				_ (Х)		
	□ Accessory Building Addition/Alteration (specify) (X)													
			Special L	Jse: (explain)						_ (Х)		
A CONTRACTOR			Conditio	nal Use: (expla	in)					_ (Х)		
			Other: (e	explain)5†	orage	ceven c	ctac	hed to	c Bunkhir	ia 1	8 X &	,)	4	18
am (are) responsible	e for the det	ail and acc	g any accompar	ying information) has mation I (we) am (are	been examined) providing and	by me (us) and to that it will be relie	o the best ed upon b	of my (our) knowy Bayfield Cou	IT WILL RESULT IN Football ownedge and belief it is not in determining what is the officials charged was a second or the contract of the contr	true, correct ether to issue	a permit. I (we	further acce	pt liabi	lity which

where sisted on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Authorized Agent: Date (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) <u>Attach</u> Address to send permit

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

<u>Praw</u> or <u>Sketch</u> your <u>Property</u> (regardless of what you are applying for)

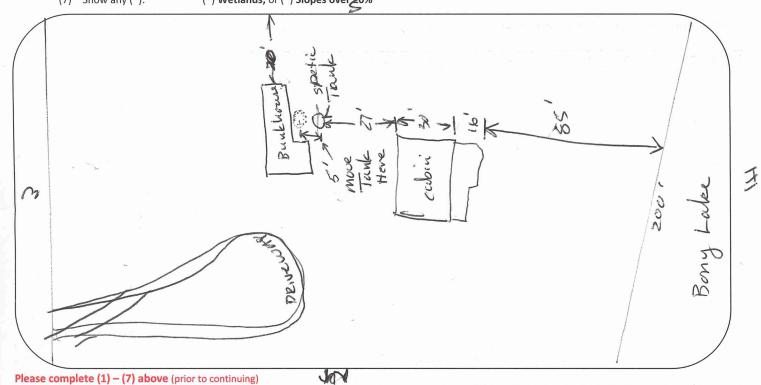
Show Location of: Proposed Construction (2)Show / Indicate: North (N) on Plot Plan

(3) Show Location of (*): (*) **Driveway** and (*) **Frontage Road** (Name Frontage Road)

(4)Show: All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

Show any (*): (6)Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)



(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

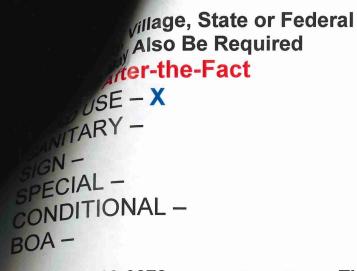
Description	Measuremen	t	Description	Measurement
Setback from the Centerline of Platted Road		Feet	Setback from the Lake (ordinary high-water mark)	/62 Feet
Setback from the Established Right-of-Way		Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	94	Feet		
Setback from the South Lot Line	201	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	225 RM	Feet	20% Slope Area on property	☐ Yes ☐ No
Setback from the East Lot Line	162 May	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	10	Feet	Setback to Well	34 Feet
Setback to Drain Field		Feet		- 1
Setback to Privy (Portable, Composting)		Feet	*	

other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Issuance Information (Coun	ty Use Only)	Sanitary Number: Flow	ISALOADS AFF	# of bedrooms: 2	Sanitary Date: 12/13/17		
Permit Denied (Date):		Reason for Denial:					
Permit #: 18-037a		Permit Date: 9-18	-18	# - #			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	☐ Yes (Deed of Record ☐ Yes (Fused/Contigue ☐ Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No		
Granted by Variance (B.O.A.) ☐ Yes No Ca	se #:		Previously Granted by	Variance (B.O.A.)	#:		
Was Parcel Legally Cr Was Proposed Building Site Deline		ATF	Were Property Lines Represented by Owner Was Property Surveyed Wes				
Inspection Record:					Zoning District (R-/)		
	النحار				Lakes Classification ()		
Date of Inspection:		Inspected by:			Date of Re-Inspection:		
Condition(s): Town, Committee or Signature of Inspector:	Board Conditions Attac	Condition: contracted obtained	A UDC permit from UDC inspection ager es to the start of a ust meet and maintain	n the locally ncy must be anstruction if	Date of Approval: 9/12/16		
Hold For Sanitary:	Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:			



BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

18-0372 Timothy & Vicki Gjovik Issued To: NO. Township Range 9 W. Barnes Location: $\frac{1}{4}$ of Section Town of CSM# 1175 Subdivision 1 Gov't Lot Lot Block

For: Residential Accessory Structure: [1- Story; Bunkhouse (36' x 12.5') = 450 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained if required. Must meet and maintain setbacks

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 18, 2018

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart. PO Box 58

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) Washburn, WI 54891 (715) 373-6138 SEP 01 2017

Permit #:	18-0378
Date:	9-18-18
Amount Paid:	250 9-1-17
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

ATF-Garage # 250

Owner's Name:							□ PRIVY							
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Authorized Agent:	/Porcon C	ionin = A -	-0										- idilibe	i i iione.
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													Attache	d
PROJECT	leg:	al Descr	iption: (Use	T Clt	Tax	ID# (4-5	digits)				Recorded	Deed (i.e. f	☐ Yes	□ No Oy Register of Dee
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	☐ Is	Propert	y/Land withi	n 1000 fee	t of Lake, P	ond or I	Flowage	Distance	Structu	re is from Shor			ain Zone?	Present?
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▼ Non-Shoreland				1)										□ No
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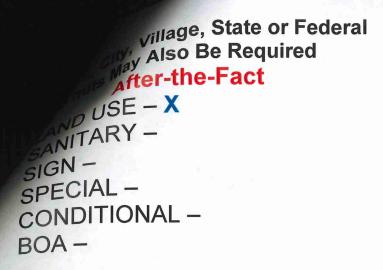
Date

Attach

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

<u>Draw</u> or <u>Sketch</u> your Property (regardless of what you are applying for)



BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

18-0378 **Timothy & Vicki Gjovik** Issued To: No. **Township** Range 9 Barnes Location: 44 W. Town of $\frac{1}{4}$ of Section CSM# 1175 2 Subdivision Gov't Lot Lot Block

For: Residential Principal Structure: [1- Story; Garage (28' x 24') = 624 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

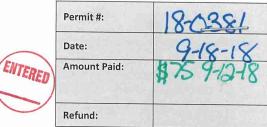
Tracy Pooler

Authorized Issuing Official

September 18, 2018

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN SEP 11 2018 Bayfield Co. Zoning Dept.



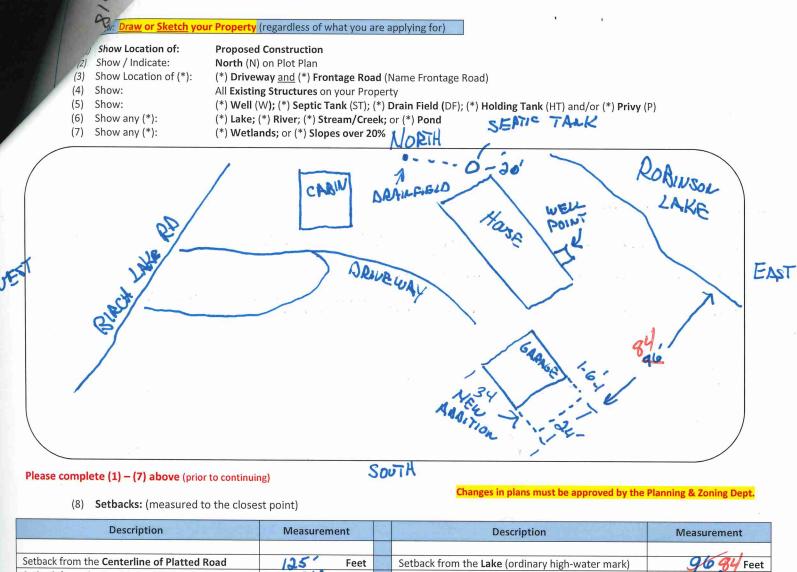
Attach
Copy of Tax Statement

Checks are made pa	yable to: B	N UNTIL ALL PERMITS	HAVE BEEN ISSUED T	O APPLICANT.						
TYPE OF PERMIT	REQUEST	TED→ □ LAN	ID USE SAN		CONDITION		CIAL USE	□ B.O.A. □	OTHER	
Owner's Name: Richard Address of Property		hwalter	te.		VE City	/State/Zip: CSSON MN	559	Telepl 44 50 Cell Pl	7-273-	
Contractor:	rch	Lake Rd.	11 V	City/State/Zip: Barnes WI 54873 Contractor Phone: Plumber: Plumber Phone:						
Mountain	eer	Costrutio	1	715-781-2464	NIA			N	//	
Authorized Agent:	1		1	Agent Phone:	Agent Mailing Ad	Idress (include City/	State/Zip):		en Authorization	
Dereny	100	scoll		715 781-2464 Tax ID#		873		Yes	No Noroperty Ownership)	
LOCATION	Legal	Description: (Use		CSM Vol & Page	96	[B) 1());	2010	K 5.	3 46 5 4	
1/4, _		1/4	6	1047/6	P Lot(s) No	o. Block(s) No.	Subdivision	1:		
Section	<u>4</u> , то	ownship 44	N, Range	W Town 6f:	Barnes		Lot Size	Acr	8, 4	
₩ Shoreland →	Creek	roperty/Land with or Landward side	in 300 feet of River of Floodplain?	r, Stream (incl. Intermittent) If yescontinue	Distance Stru	cture is from Shor	reline : feet	Is Property in Floodplain Zone	Are Wetlands Present?	
w Shoreland —	⋈ Is Pi	roperty/Land withi	in 1000 feet of Lake	e, Pond or Flowage If yescontinue	Distance Stru	icture is from Shor	eline : feet	☐ Yes No	☐ Yes	
☐ Non-Shoreland										
Value at Time of Completion * include donated time &	Project # of Storie			Foundation	# of bedrooms in		What Type er/Sanitary on the proj	System	Type of Water	
material	□ New	Construction	¥ 1-Story	Pacament	structure				property	
6 111		tion/Alteration	☐ 1-Story + Lo					/ Type:	☐ City	
15600		ersion /	☐ 2-Story					s) Specify Type: Sofic		
		cate (existing bldg)								
Run a Business on Property			Use ✓ None ─ Portable (w/ser				ract)	1		
	FIOP	erty		Year Round	,					
		erty		☐ Year Round						
Existing Structure Proposed Constru	e: (if perr		or is relevant to it)		8	☐ Compost To		Height:	8.	
	e: (if perruction:		or is relevant to it)	Length: 2	6	☐ Compost To☐ None Width: 2	ilet /		Square	
Proposed Constru	e: (if perruction:	mit being applied fo		Length: 2 Length: Proposed Structu	ire	☐ Compost To☐ None Width: 2	ilet /	Height: Height:		
Proposed Constru	e: (if perruction:	mit being applied fo	Structure (first s e (i.e. cabin, hunt	Length: 2 Length: Proposed Structure structure on property	ire	☐ Compost To☐ None Width: 2	ilet /	Height: Height:	Square	
Proposed Constru	e: (if perruction:	mit being applied fo	Structure (first s e (i.e. cabin, hunt with Loft	Length: 2 Length: Proposed Structure structure on property	ire	☐ Compost To☐ None Width: 2 5	ilet /	Height: Height: mensions X X X X X X Y X Y X Y X Y X Y X Y X Y	Square	
Proposed Constru	e: (if perruction:	mit being applied fo	Structure (first s e (i.e. cabin, hunt	Length: 2 Length: Proposed Structure on property ting shack, etc.)	ire	☐ Compost To☐ None Width: 2 5	ilet /	Height: Height: mensions X X X	Square	
Proposed Constru	e: (if perruction:	mit being applied fo	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Por with a Deck	Length: 2 Length: Proposed Structure structure on property, ting shack, etc.)	ire	☐ Compost To☐ None Width: 2 5	ilet /	Height: Height: Mensions X X X X X X X X X X X X X	Square	
Proposed Constru	e: (if pernuction:	mit being applied fo	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec	Length: 2 Length: Proposed Structus structure on property ting shack, etc.)	ire	☐ Compost To☐ None Width: 2 5	ilet /	Height: Height: X) X) X) X) X) X) X) X) X)	Square	
Proposed Constru	e: (if pernuction:	mit being applied for Principal Residence	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attached	Length: 2 Length: Proposed Structure on property) ting shack, etc.) ch k d Garage	ire	□ Compost To □ None Width: 25 Width: 2	Dir (((((((((((((((((((Height: Height: X) X) X) X) X) X) X) X) X) X	Square	
Proposed Constru	e: (if pernuction:	mit being applied for Principal Residence	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Pore with a Deck with (2 nd) Dece with Attached see w/ (□ sanitary,	Length: 2 Length: Proposed Structure on property, ting shack, etc.) ch d Garage or Sleeping quarters	ire	□ Compost To □ None Width: 25 Width: 2	Dir (((((((((((((((((((Height: Height: X) X) X) X) X) X) X) X) X) X	Square	
Proposed Constru	e: (if pernuction:	mit being applied for Principal Residence Bunkhou Mobile H	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Pore with a Deck with (2 nd) Dec with Attached se w/ (□ sanitary, lome (manufacture)	Length: 2 Length: Proposed Structure on property, ting shack, etc.) ch d Garage or sleeping quartersed date)	re , or □ cooking &	□ Compost To □ None Width: 25 Width: 2	Dir	Height: Height: X) X) X) X) X) X) X) X) X) X	Square Footage	
Proposed Constru	e: (if pernuction:	Principal Residenc Bunkhou Mobile H	Structure (first set i.e. cabin, hunt with Loft with a Porch with (2nd) Porch with a Deck with (2nd) Deck with Attached set w/ (Length: 2 Length: 2 Length: 2 Length: 2 Length: 2 Length: 4 Structure on property (Iting shack, etc.) ch ch d Garage or	re , or □ cooking &	□ Compost To □ None Width: 25 Width: 2	Dir (((((((((((((((((((Height: Height: X) X) X) X) X) X) X) X) X) X	Square Footage	
Proposed Constru	e: (if pernuction:	□ Principal □ Residenc □ Bunkhou □ Mobile H ■ Addition □ Accessor	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Pore with a Deck with (2 nd) Dec with Attached use w/ (sanitary, lome (manufacture / Alteration (spec	Length: 2 Length: 2 Length: 2 Length: 2 Length: 2 Length: 4 Structure on property (Iting shack, etc.) ch ch d Garage or	or □ cooking &	□ Compost To □ None Width: 25 Width: 2	Dir	Height: Height: X) X) X) X) X) X) X) X) X) X	Square	
Proposed Constru	e: (if pernuction:	Principal Residence Bunkhou Mobile H Addition Accessor	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attached use w/ (sanitary, lome (manufacture / Alteration (spec y Building (spec	Length: 2 Length: 2 Length: 2 Length: 2 Length: 2 Length: 2 Length: 4 Structure on property (Length: 4 Le	or □ cooking &	Compost To None Width: 2 Width: 2 Food prep facilities	Dir	Height: Height: X) X) X) X) X) X) X) X) X) X	Square Footage	
Proposed Constru	e: (if pernuction:	Bunkhou Mobile H Addition Accessor Special U	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Pore with a Deck with (2 nd) Dec with Attached se w/ (sanitary, lome (manufacture / Alteration (spec ry Building Additi	Length: 2 Length: Proposed Structure on property, ting shack, etc.) ch d Garage or sleeping quartersed date) cify) con/Alteration (specify)	or □ cooking &	Compost To None Width: 25 Width: 2 food prep facilities	Dir	Height: Height: X) X) X) X) X) X) X) X) X) X	Square Footage	
Proposed Constru	e: (if pernuction:	Bunkhou Mobile H Addition Accessor Accessor Conditio	Structure (first s e (i.e. cabin, hunt with Loft with a Porch with (2 nd) Pore with a Deck with (2 nd) Dec with Attached se w/ (sanitary, lome (manufacture / Alteration (spec ry Building Additi	Length: 2 Length: Proposed Structus structure on property ting shack, etc.) ch ck d Garage or sleeping quarters ed date) cify) Company cify) Company con/Alteration (specify)	or □ cooking &	Compost To None Width: 25 Width: 2 food prep facilities	Dir	Height: Height: X) X) X) X) X) X) X) X) X) X	Square Footage	
Proposed Construence Proposed Us Residential U Commercial I (we) declare that this are (are) responsible for the result of Bayfield County property at any reasonab Owner(s):	e: (if periuction: Be Use Use Use pplication (in detail and acy relying on to let time for the second s	Bunkhou Bunkhou Addition Accessor Special U Conditio Other: (e FAILURE TO cluding any accompanyir curacy of all information I (we) an he purpose of inspection	Structure (first see (i.e. cabin, hunt with Loft with a Porch with (2nd) Porch with a Deck with (2nd) Deck with Attached (see w/ (sanitary, lome (manufacture y Building Additional Use: (explain)	Length: 2 Length: Proposed Structus structure on property ting shack, etc.) ch ck d Garage or sleeping quarters ed date) cify) Company cify) Company con/Alteration (specify)	MITHOUT A PERMITest of my (our) knowle Bayfield County in det to county officials char	Compost To None Width: 2 S Width: 2 S Food prep facilities Food prep facilities	Dir ((((((((((((((((((Height: Height: X	Square Footage Footage Agrae St. Agrae St	

52230

Address to send permit_

Barnes WI 54873



Setback from the Established Right-of-Way Feet Setback from the River, Stream, Creek Feet Setback from the Bank or Bluff Feet Setback from the North Lot Line Feet Setback from the South Lot Line Setback from Wetland Feet Feet Setback from the West Lot Line 20% Slope Area on the property Feet **X**No Setback from the East Lot Line Elevation of Floodplain Feet Feet Setback to Septic Tank or Holding Tank Feet Setback to Well 42 Feet Setback to Drain Field Feet Setback to Privy (Portable, Composting) Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 18-6381	Permit Date: 9-	18-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue Yes Yes	ous Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required
Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #:		Previously Granted by ☐ Yes ☐ No	/ Variance (B.O.A.)	e #:
Was Proposed Building Site Delineated		Were Property Line	s Represented by Owner Was Property Surveyed	Yes
Inspection Record: THPERS Surfaces & 2nd/Bi	vall House	1		Zoning District (R-/) Lakes Classification (2)
Date of Inspection:	Inspected by:			Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attack	Condition: No for human hab necessary co pressurized wa	o accessory building solution / sleeping purpounty and UDC pater shall enter the busection to POWTS. Mi	shall be used poses without permits. No uilding unless	Date of Approval:
Hold For Sanitary:	Hold For Affiday	vit: 🗆 Ho	ld For Fees: 🗆	



BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Richard & Martha Buckwalter / Jeremy Driscoll, Agent 18-0381 Issued To: No. **Barnes** Range 9 W. Town of **Township** 44 $\frac{1}{4}$ of -Section I ocation: Par in CSM# Subdivision Lot Block Gov't Lot

For: Residential Accessory Addition / Alteration: [1- Story; Garage Addition (24' x 34') = 816 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 18, 2018

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

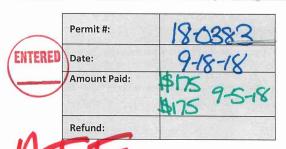
◆ Shoreland -

Address to send permit

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

SEP 0 5 2018

Bayfield Co. Zoning Dept



Is Property in

oodplain Zone?

Yes

No

feet

Present?

Yes

No

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)

 $\hfill \square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage

Creek or Landward side of Floodplain?

					17	11		TILLOG	THE HER (NOTE	NCIE)
TYPE OF PERMIT RE	QUESTED-	LAND USE	☐ SAI	VITAR'	Y PRIVY	□ CONDIT	IONAL USE	☐ SPECIAL	USE 🗆 B.O.	A. OTHER
Owner's Name:				Maili	ng Address:	Hills	City/State/Zi	p:		Telephone:
W. Andr	ew Loh	man.		490	o Herit	age	Bloom	. Mn.	55437	612-328-3474
Address of Property:		•		City/S	State/Zip:					Cell Phone:
55900 Isl	and Lak	e Dr.	1	B	arnes	WI		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 1	612-805-9339
Contractor:	1 -1	100 010			actor Phone:	Plumber:				Plumber Phone:
Hndre	W	man			328.347			A		
Authorized Agent: (Per	rson Signing Application	on behalf of Ow	ner(s))	Agent	Phone:	Agent Maili	i ng Address (in	clude City/State	e/Zip):	Written Authorization
							*			Attached
				Tax II	\#				Decembed December	☐ Yes ☐ No
PROJECT	Legal Description:	(Use Tax Stat	ement)	IdxiL	" 2 U	199				ment: (Showing Ownership)
LOCATION		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	cinicity		51	175			100 014	tment
***		ov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc#	Lot(s) No.	Block(s) No.	Subdivision:	
1/4,	1/4		16/17/		845/373	C			Btawa T	tomi Estates
Section 18	Township 45	N Pango	9	.,	Town of:				Lot Size	Acreage
Jection/	, rownsilly	N, Range	₹	V	1	100			A	

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
~ *	☐ New Construction	☐ 1-Story	☐ Basement	□ 1 🤈	☐ Municipal/City	☐ City
1250	Addition/Alteration	☐ 1-Story + Loft	☐ Foundation	□ 2	☐ (New) Sanitary Specify Type:	Well
\$350	Conversion	☐ 2-Story	X Posts	□ 3	Sanitary (Exists) Specify Type: Gravity	
	☐ Relocate (existing bldg)	×			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on	/	Use	> None	☐ Portable (w/service contract)	
	Property		Year Round		☐ Compost Toilet	
					□ None	1

-continue -

If yes---continue

Distance Structure is from Shoreline :

Distance Structure is from Shoreline:

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length:	Width:	Height:

Proposed Use	1	Proposed Structure		Dimensions	Square Footage
		Principal Structure (first structure on property)	(X)	
		Residence (i.e. cabin, hunting shack, etc.)	(х)	
N		with Loft	(х)	
Residential Use		with a Porch	(х)	
		with (2 nd) Porch	(х)	
		with a Deck	(х)	
		with (2 nd) Deck	(х)	
☐ Commercial Use		with Attached Garage	(х)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(х)	
		Mobile Home (manufactured date)	(х)	
☐ Municipal Hea	*	Addition/Alteration (specify) 12 4 27 1 ROOF of Garage	(1	2×241	288
☐ Municipal Use		Accessory Building (specify)	(х)	
		Accessory Building Addition/Alteration (specify)	(x)	
		Special Use: (explain)	(х)	
		Conditional Use: (explain)	(х)	
		Other: (explain)	(Χ)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a

result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering cou	nty ordinances t	to have access to the above describ
property at any reasonable time for the purpose of inspection. Owner(s):		01/1/18
Owner(s): W (VOICU GOV VIVOV)	Date	9/9/18
(If there are Multiple Owners listed on the Deed <u>All</u> Owners must sign <u>or</u> letter(s) of authorization must accompany this application)		
Authorized Agent:	Date	
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)		

Copy of Tax Statement

Attach

Please complete (1) – (7) above (prior to continuing)

_well

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement		Description	Measurement	
Setback from the Centerline of Platted Road	Feet		Setback from the Lake (ordinary high-water mark)	125	F Feet
Setback from the Established Right-of-Way	70 Feet		Setback from the River, Stream, Creek		Feet
	, 0		Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	175 Feet				
Setback from the South Lot Line	261 Feet		Setback from Wetland		Feet
Setback from the West Lot Line	7.5 Feet	H	20% Slope Area on the property	☐ Yes	□No
Setback from the East Lot Line	125 Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	125 Feet		Setback to Well	75'	Feet
Setback to Drain Field	125 Feet				
Setback to Privy (Portable, Composting)	Feet				

€ 24' -3

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Issuance Information (County Use Only)	Sanitary Number: # of bedrooms:			Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 18-0383	Permit Date: 9-19	8-18				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes Cheed of Reconfigure	uous Lot(s)) 💆 No	Mitigation Required Mitigation Attached	the country of the same of the country of the count	Affidavit Required		
Granted by Variance (B.O.A.) ☐ Yes	A. Car	Previously Granted by Yes No	y Variance (B.O.A.) Case	#:		
		Were Property Line	es Represented by Owner Was Property Surveyed	✓ Yes □ No □ No		
Inspection Record:			, November 1	Zoning District (R-/) Lakes Classification (A)		
Date of Inspection: 9/1/16	Inspected by:			Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions At	Condition: No acc human habitation necessary county a water shall enter	essory building shall be	e used for s without ressurized approved	Date of Approval: 9/14/16		
Hold For Sanitary: Hold For TBA:	Hold For Am	davit: ப	Hola For Fees:			

Village, State or Federal VISE - X VICARY SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

18-0383 Issued To: W Andrew Lohman No. 18 45 W. Barnes Location: 1/4 of Section Township Range 9 Town of Subdivision Potawatomi Estates CSM# Gov't Lot 17-18 Lot Block

For: Residential Addition / Alteration: [Roof off Garage (12' x 24') = 288 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

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completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 18, 2018